| POSITION | INITIALS | ID NO. | DATE |
|---|---|---|---|
| | | | |
| FEE DETERMINATION | | | |
| O.I.P.E. CLASSIFIER | | 6 | 9-19-01 |
| FORMALITY REVIEW | | | |
| RESPONSE FORMALITY REVIEW | | | |
| | | | |

## INDEX OF CLAIMS

| | | | | | |
|---|---|---|---|---|---|
| ✔ | ................................. Rejected | | N | ................................. Non-elected |
| = | ................................. Allowed | | I | ................................. Interference |
| — | (Through numeral)... Canceled | | A | ................................. Appeal |
| ÷ | ................................. Restricted | | O | ................................. Objected |